

To: Kirk Roegner (EPA Region 8 Contract Officer)  
Barbara Nelson (EPA Region 8 Project Officer)  
cc: SRC Project File  
From: William Brattin (SRC WAM)

Ronce

Category	Expenses		Budget			Percent Complete <sup>(b)</sup>
	This Month (a)	Cumulative	Ceiling	Funded	Remaining	
██████████	██████████	██████████	██████████	██████████	██████████	██████████
LOE (\$)	\$3,608.55	\$22,531.71	\$96,475	\$96,475	\$73,943.29	23%
SRC Travel (\$)			--	--	--	--
SRC ODC (\$)			\$366	\$366	\$ 366.00	0%
Subcontractors (\$)	\$20,819.78	\$20,819.78	\$49,689	\$49,689	\$28,869.22	42%
TOTAL (\$)	✓ \$24,428.33	✓ \$43,351.49	✓ \$146,530	\$146,530	✓ \$103,178.51	30%

(b) Based on funded budget

- No SRC ODCs were incurred in this reporting period.

- SRC received an invoice from the University of Cincinnati (UC) for work performed from 5/25/12 to 7/31/12. [REDACTED]

This invoice and a documentation of activities performed by UC are included in Attachment 1. In accord with contract rules, SRC marked up this cost to

### Task 1 – Support for Non-Cancer Toxicity Factor (RfC)

- SRC met with EPA (Benson, Berry) on 8/6 to review status and discuss project tasks.

#### Subtask 1a – Revisions to the RfC Supporting Data and Documentation

- SRC prepared a summary of IH data and fitting activities for discussion with NCEA. This was sent to EPA and NCEA on 8/2. This included a recommendation that IH data from indoor jobs in the trionizing department be evaluated on a by-job basis, rather than pooling all indoor data.
- SRC participated in a conference call with NCEA on 8/8 to discuss work done to date and to evaluate issues and options for fitting the IH data.
- As a follow-up to the call with NCEA, SRC performed fitting of the IH data using un-weighted linear regression and prepared a set of graphs and tables that compared the “independent b” approach to the “common b” approach. This was sent to NCEA for review on 8/8.
- As a follow-up to the call with NCEA, SRC performed an analysis of the frequency and magnitude of IH values with unexpectedly low values. This analysis was sent to EPA for review on 8/8.
- SRC prepared an “options memo” that outlined a series of six alternative strategies for fitting the IH data from the trionizing department. This was sent to EPA and UC on 8/19 for review and discussion.
- As a follow-up to the “options memo”, SRC calculated the mean-square error for each of the alternative approaches to help in the evaluation process. SRC participated in a call with UC on 8/20 to clarify the Option 5 (un-weighted fitting with common b for indoor and outdoor jobs).


#### Task 2 – Technical Review and Oversight for the Conduct of Risk Assessments for Libby

- SRC participated in a conference call with EPA on 8/3/12 to discuss the FBAS manuscript. SRC performed edits and authored new text on the use of MLE fitting as discussed in the call.

#### **DELIVERABLES SUBMITTED**

Task	Deliverable Title	Due Date	Date Delivered	Recipient(s)
1				
1a	Data summary for NCEA	--	8/2	EPA Region 8, NCEA
	Un-weighted fitting by job	--	8/8	EPA Region 8, NCEA
	Analysis of low IH values	--	8/8	EPA Region 8, NCEA
	Options memo	--	8/19	EPA Region 8, UC
2	Edits on FBAS manuscript	--	8/3	David Berry

#### **ISSUES IDENTIFIED AND REMEDIAL ACTIONS TAKEN**

- 
- SRC notified EPA that the scope of work required from the University of Cincinnati was substantially larger than had been anticipated, and that additional funding would be required to support this expanded scope. SRC prepared and submitted a formal request for additional funding.

#### **ANTICIPATED ACTIVITIES FOR NEXT MONTH**

##### Task 1 – Support for Non-Cancer Toxicity Factor (RfC)

- SRC will work with EPA to address issues raised by the SAB and by NCEA regarding the modeling of the Marysville data.



Subtask 1a – Revisions to the RfC Supporting Data and Documentation

- SRC will work with UC to perform independent b and common b fitting of the IH data using variance-weighted linear regression. SRC will prepare a set of graphs and tables that compared the “independent b” approach to the “common b” approach. This will be used to generate a JEM based on weighted fitting of the IH data and generation of new cumulative exposure values by worker by year

Task 2 – Technical Review and Oversight for the Conduct of Risk Assessments for Libby

- SRC will provide evaluation and review of documents or data as may be requested by EPA.

**ANTICIPATED DELIVERABLES FOR NEXT MONTH**

Task	Deliverable Title	Deliverable Date
1	Revised model fitting calculations	TBD
1a	JEM and cumulative exposure values based on AM data	TBD
2	Risk assessment support as requested	TBD

**ESTIMATE OF SUBSTANTIAL LAGGING COSTS**

SRC has been provided a list of hours expended and work performed by UC staff in August [REDACTED]  
[REDACTED] These costs will be billed when an invoice is received from the  
University.

**ATTACHMENT 1**

**DOCUMENTATION OF SUBCONTRACTOR COSTS FOR TASK 0005**

#### Brief description of UC activities for May 25 – June 30, 2012

- Created data files as requested by SRC/EPA
- Considered potential bias due to differing sampling durations and potential strategies for addressing issue
- Discussed the use of arithmetic v. geometric mean for IH data
- Evaluated use of 0 for samples <LOD
- Call with EPA/SRC on June 12 to discuss arithmetic v. geometric, samples <LOD, sample duration issue
- Considered methods of developing exposure estimates using arithmetic means
- Evaluated methodology/appropriateness of SRC proposed model and associated exposure matrix
- Considered alternate fitted curves
- Discussed outliers in dataset
- Call with SRC on June 28 to discuss modeling the data, sample duration issue, and outliers
- Call with SRC on June 28 to discuss alternate modeling strategies

#### Brief description of UC activities for July 1 – 31, 2012

- Developed exponential models for IH data
- Reviewed updated exposure matrix for accuracy
- Call with EPA/SRC on July 23 to discuss trionizing data points, sample duration, and the updated JEM
- Developed LOESS models for IH data
- Evaluated appropriateness of LOESS and exponential models
- Reviewed text for RfC
- Reviewed CHEEC formula for accuracy
- Reviewed process for handling trionizing data

# **CONTRACT INVOICE BACKUP REPORT (Combined CIB1, CIB-2, CIB-3, CIB-4)**

Order Number	EP-11-S8-03	Invoice Number	121221
Order Name	Region 8 Risk Assessment Support	Invoice date	9/12/2012
Task Order	0005 (Libby Asbestos Superfund Site Human Health Risk Assessment)		
Invoice period of performance	08/01/2012 -08/31/2012		

## **PART A: SRC LABOR**

Title	Name	Rate	Current Period		Project Cumulative	
			Total hrs	Total Amt	Total hrs	Total Amt
SRC LABOR TOTALS				\$3,608.55	\$22,531.71	

## **PART B: SRC TRAVEL**

Title	Name		Current	Cumulative
	Travel cost			
	Travel cost			
	Total travel cost			
	G&A (travel)			
SRC TRAVEL TOTALS			\$0.00	\$0.00

## **PART C: SRC ODCs**

		Current	Cumulative
	ODCs		
	G&A (ODCs)		
SRC ODC TOTALS		\$0.00	\$0.00

## **PART D1: SUBCONTRACTOR LABOR**

Title	Name (Company)	Rate	Current Period		Project Cumulative	
			Total hrs	Total Amt	Total hrs	Total Amt

## **PART D2: SUBCONTRACTOR TRAVEL**

Title	Name (Company)		Current	Cumulative
	Travel cost			
	Travel cost			
	Total travel cost			
	SRC G&A (subcontractor)			
SUBCONTRACTOR TRAVEL TOTALS			\$0.00	\$0.00

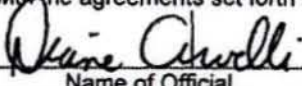
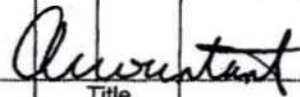

## **PART D3: SUBCONTRACTOR ODCs**

Sub-Contractor Company		Current	Cumulative
	ODCs		
	ODCs		
	Total subcontractor ODCs		
	SRC G&A (subcontractor)		
SUBCONTRACTOR ODC TOTALS		\$0.00	\$0.00

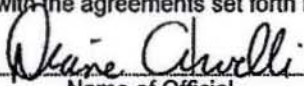
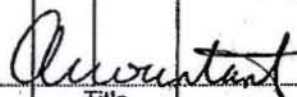
## **PART E: TASK ORDER TOTALS**

		Current Period		Project Cumulative	
		Total hrs	Total Amt	Total hrs	Total Amt
	TASK ORDER TOTALS		\$24,428.33		\$43,351.49



Standard Form 1034 7 GAO 5000 1034-114		<b>PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL</b>			VOUCHER NO.  05	
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION  U.S. ENVIRONMENTAL PROTECTION AGENCY 109 TW ALEXANDER DRIVE MAIL CODE - D143-02 RESEARCH TRIANGLE PARK, NC 27711				DATE VOUCHER PREPARED 09/12/12		SCHEDULE NO.  PAID BY  DATE INVOICE RECEIVED  DISCOUNT TERMS  PAYEE'S ACCOUNT NUMBER
				CONTRACT NUMBER AND DATE EP-S8-11-03		
				REQUISITION NUMBER AND DATE		
PAYEE'S NAME AND ADDRESS SRC, INC M&T Bank (ACH - EPA) 7502 Round Pond Road North Syracuse, NY 13212 FEDERAL TAX ID NUMBER: 15-0589832 FA535.CF999.0.005						
SHIPPED FROM		TO		WEIGHT		GOVERNMENT B/L NUMBER
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>		QUAN- TITY	UNIT PRICE COST PER	AMOUNT (1)
	August 1, 2012 through August 31, 2012	For detail, see SF 1035 Continuation Sheet, total amount claimed transferred from Page 1 SF 1035. <b>TASK ORDER 0005</b> COST REIMBURSABLE PROVISIONAL PAYMENT  "I certify that all payments requested are for appropriate purposes and in accordance with the agreements set forth in the contract."  <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">             Name of Official         </div> <div style="width: 40%; text-align: right;">             Title         </div> </div>				\$24,428.33
(Use continuation sheets(s) if necessary) (Payee must NOT use the space below)				TOTAL		\$24,428.33
PAYMENT: APPROVED FOR		EXCHANGE RATE				
COMPLETE Provisional payment subject to later audit		= \$1.00				
PARTIAL BY:						
FINAL Michelina Torre						
PROGRESS TITLE:		Amount verified, correct for				
ADVANCE Defense Contract Audit Agency, Branch Manager		(Signature or Initials)				
ACCOUNTING CLASSIFICATION						
BMD PA	CHECK NUMBER ON TREASURER OF THE UNITED STATES			CHECK NUMBER ON (Name of bank)		
	CASH DATE			PAYEE		
1. When stated in foreign currency, insert name of currency. 2. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title. 3. When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.				PER		
				FY12 FY12 FY12		
				 B2000579654		

 RECEIVED  
 2012 SEP 18 AM 10 00  
 RFP FINANCE

Standard Form 1034 7 GAO 6000 1034-114		<b>PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL</b>			VOUCHER NO.  05	
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION  U.S. ENVIRONMENTAL PROTECTION AGENCY 109 TW ALEXANDER DRIVE MAIL CODE - D143-02 RESEARCH TRIANGLE PARK, NC 27711				DATE VOUCHER PREPARED 09/12/12		SCHEDULE NO.  PAID BY  DATE INVOICE RECEIVED  DISCOUNT TERMS  PAYEE'S ACCOUNT NUMBER  GOVERNMENT BAL. NUMBER
				CONTRACT NUMBER AND DATE EP-S8-11-03		
				REQUISITION NUMBER AND DATE		
PAYEE'S NAME AND ADDRESS SRC, INC M&T Bank (ACH - EPA) 7502 Round Pond Road North Syracuse, NY 13212 FEDERAL TAX ID NUMBER: 15-0589832 FA535.CF999.0.005						
SHIPPED FROM		TO		WEIGHT		GOVERNMENT BAL. NUMBER
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>	QUAN- TITY	UNIT PRICE COST PER	AMOUNT (1)	
	August 1, 2012 through August 31, 2012	For detail, see SF 1035 Continuation Sheet, total amount claimed transferred from Page 1 SF 1035. <b>TASK ORDER 0005</b> COST REIMBURSABLE PROVISIONAL PAYMENT  "I certify that all payments requested are for appropriate purposes and in accordance with the agreements set forth in the contract."  <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">             Name of Official         </div> <div style="width: 40%; text-align: right;">             Title         </div> </div>			\$24,428.33	
<small>(Use continuation sheets(s) if necessary)</small>			<b>TOTAL</b>		\$24,428.33	
PAYMENT: APPROVED FOR <input type="checkbox"/> COMPLETE Provisional payment subject to later audit <input type="checkbox"/> PARTIAL BY: <input type="checkbox"/> FINAL Michelina Torre <input type="checkbox"/> PROGRESS TITLE: <input type="checkbox"/> ADVANCE Defense Contract Audit Agency, Branch Manager		EXCHANGE RATE = \$1.00				
			<small>Amount verified; correct for</small>			
			<small>(Signature or initials)</small>			
ACCOUNTING CLASSIFICATION						
BND P \$	CHECK NUMBER		ON TREASURER OF THE UNITED STATES		CHECK NUMBER ON (Name of bank)	
	CASH		DATE		PAYEE	
1. When stated in foreign currency, insert name of currency. 2. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title. 3. When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.					PER	
					TITLE	



Billing Number: 0005  
Invoice Number: INV-00000121221

Invoice Date: 09/12/2012

Bill To:  
US ENVIRONMENTAL PROTECTION AGENCY  
109 TW ALEXANDER DRIVE  
MAIL CODE D-143-02  
RESEARCH TRIANGLE PARK, NC 27711

Remit To:  
SRC, Inc  
7502 Round Pond Road  
North Syracuse, NY 13212-2510

Customer Number: 1019  
Prime Contract Number: EP-S8-11-03  
Subcontractor Number: GS-00F-0019L  
Customer PO Number: TASK ORDER 0005  
Project Number: FA535.CF999.0.005  
Project Name: R8 RA TO5 Libby Asbestos  
Terms: NET 30  
Due Date: 10/12/2012

	Contract Value	Funded Value
Cost:	0.00	146,530.02
Fee:	0.00	0.00
Total:	0.00	146,530.02

Cumulative Amount Billed: 43,351.49

Billing Period From: 08/01/2012  
To: 08/31/2012

	Current Hours	Rate	Current Amount	Cumulative Hours	Cumulative Amount
<div></div>					
DIRECT LABOR			✓ 3,608.55		22,531.71
<div></div>					
SUBCONTRACT			20,819.78		20,819.78
OTHER DIRECT COSTS			20,819.78		20,819.78
<div></div>					
Invoice Total			✓ 24,428.33		43,351.49 ✓

Current Incurred Hours:  
Cumulative Incurred Hours:

Date: 09/12/12  
Time: 9:49:58 AM

## SRC Consolidated

Page 3

### Project Labor Summary

By Project, Project Labor Category (PLC), Employee/Vendor Detail  
As of Fiscal Year: 2012 Period: 11 Subperiod: 1 Ending: 08/31/2012

Project: FA535.CF999.0.005  
Name: R8 RA T05 Libby Asbestos  
Owning Organization: 01.02.11.01.00  
Prime Contract Number: EP-S8-11-03  
Subcontract Number: GS-00F-0019L  
Purchase Order: TASK ORDER 0005  
Project Manager: HOHREITER, DAVID W  
Customer: EPA

Contract Value: 0.00  
Funded Value: 146,530.02  
Project Classification: DIRECT PROJECT  
Project Type: GOVT PRIME T&MT  
Period of Performance: 02/09/2012 - 06/30/2013  
Active: Yes

	Period
Labor Category	Actual Hours

Project Labor Category (PLC): TM3SRC TECH MGR 3 - SRC

Project Labor Category (PLC):

Total for FA535.CF999.0.005:

WorkflowGen  
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Electronic Forms

 Print Form  
 Close Window


## Invoice Approval

\*This is to be used for 2WAY P.O.'s ONLY.\*

 Prepared By: Rucker, John  
 Date Prepared: 6/16/2012  
 Invoice Number: 1904150  
 PO Number: SCFAS3501  
 Supplier: University of Georgia  
 Invoice Date: 6/14/2012  
 Time Frame Start: 5/25/2012  
 Time Frame End: 7/01/2012  
 Type: ☒ Direct ☐ Indirect  
 For Company: ☒ SRC ☐ SRECTM

AP Use Only	
Vendor #	
Voucher #	
e-Form #	41371

Invoice Checklist	
Program Manager/Technician:	
Subcontractor Progress is Acceptable:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Milestones have been met:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Deliverables have been received (i.e. Status Report):	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Invoice hours, OGC's and travel are consistent with subcontractor's proposal and are acceptable for the invoice line items:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Financial:	
Invoice hours, travel and OGC's add up correctly:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Cumulative Total should be in accordance with approved budget(s), including any line item:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Cumulative line items - Check that the previous invoice cumulative line item plus the current line item equals the current cumulative:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Subcontractor:	
P.O. / Subcontractor Number:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Correct Subcontractor:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Time period of invoice should coincide with previous invoice. It generally would not overlap with the previous invoice and should NEVER extend the termination date:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Invoice numbering should be sequential, following previous invoice:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Invoice rates are in accordance with the contractually approved rates:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Overhead rates are properly applied to the appropriate cost elements:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Invoice costs are allocated to the proper Purchase Order line:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Check that fringe benefit rate and amounts are accurate for current invoice:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Invoice labor, travel, material and OGC's are recorded to the respective source documents (i.e. proposals and invoices) and are allowable and allocable:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Description:

## Accounting Information

P.O. Line	Account No.	Project No.	Organization No.	Total \$	Sub Total
1	5-4-000	FA333.CF999.0.000.000.000	01.02.11.01.00	19,410.33	
					19,410.33

Please Attach the Invoice and other relevant files:

Invoice 1904150 6-16-12.pdf (202.8 KB) [ Upload ] [ Details ]

Invoice 1904150 6-16-12.pdf (202.8 KB)	[ Upload ] [ Details ]
	[ Upload ] [ Details ]
	[ Upload ] [ Details ]
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## Approvals

Other Approvals - 2

Approver Name	Role	Decision	Date
Brady, William	Reviewer	Approved as Manager and routed to Hudgins, Joe	6/16/2012 12:17:20 PM
Hudgins, Joe	Reviewer	Approved as P.A. and routed to Rucker, John	6/16/2012 2:48:46 PM
Rucker, John	Reviewer	Approved as Manager and routed to Procurement for final approval	6/20/2012 8:16:49 AM
Rucker, John	Procurement	Routed to Grivell, Diane	6/20/2012 8:16:40 AM

## No Log

## Comments

Public Comments - 3

User	Comment	Date
Rucker, John	Invoice Approval Routing Sequence: B. Brady to J. Hudgins to J. Rucker to D. Grivell.	6/16/2012 7:17:30 AM
Hudgins, Joe	Though the award amount in the heading of the invoice equals \$27,572, the budget total in the body of the invoice does not add correctly due to the labor dollars being double counted. The amount due for the invoice is totaled correctly.	6/16/2012 11:11:50 AM
Rucker, John	Return to Preparer - Subcontractor Invoice corrections pending.	6/16/2012 11:14:00 AM
Rucker, John	Revised subcontractor Invoice attached - Invoice Approval routed back to beginning for review. JGR, Invoice Approval Routing Sequence: B. Brady to J. Hudgins to J. Rucker to D. Grivell.	6/16/2012 11:40:13 AM

Enter Comments:

I, the undersigned, certify that I have reviewed this invoice/request for payment and supporting documentation in accordance with this checklist. Based on this documentation and my personal knowledge of the activity, I hereby approve this invoice/request for payment.

Process and close the Form

- ☐ Save for later.  
☐ Process and close.  
☐ Route to another AP member: \_\_\_\_\_  
☐ Reject to Procurement: \_\_\_\_\_

[ Submit ]

 327844  
 9/14/12





## Sponsored Program Accounting

51 Goodman Drive  
530 University Hall ML 0022

August 14, 2012

**INVOICE**

Invoice Number: 1904159  
Sponsor Reference: FA535/SC01  
Principal Investigator: Dr Lockey  
Award Amount: \$ 27,679.00  
Award Period: 5/24/2012 - 6/30/2013  
UC Reference: 1009759  
UC Federal Tax ID #: 31-6000989

[jrocker@srcinc.com](mailto:jrocker@srcinc.com)

Order Number: EP -11-58-03

**Order Name:** Region 8 Risk Assessment Support

Task Order: 0005 (Libby Risk Assessment Support)

**Invoice Period 5/25/12 - 7/31/12**

### Part D1: Subcontractor Labor

**PO# SCFA53501**

Name	Rate	Current Period		Project Cumulative	
		Total Hours	Total AMT	Total Hrs	Total Amount
<b>Subcontractor Labor Totals</b>					
			\$19,410.33		\$19,410.33

**Amount Due: \$19,410.33**

Please enclose a copy of this invoice with your payment or reference the invoice number on your remittance to:

ACH/EFT Payment:	PNC Bank
(CCD PLUS Compatible)	201 East Fifth Street
	Cincinnati, OH 45202
	ABA (RTN) # 041000124
	Account # 4070624490
Account Name:	University of Cincinnati
SWIFT:	PNCUS33

**Payment Terms- Net 30 Days**

Prepared by: Jean Kaesemeyer (513) 556-4814 kaesemjk@ucmail.uc.edu

I hereby certify that all expenditures reported or payments requested are for appropriate purposes and are in accordance with the agreements set forth in the award documents.

Sonya VonLuehrte, Assistant Director  
SRS Accounting Division

cc: Teresa Pyles  
File